



Florida Department of Agriculture and Consumer Services
Division of Plant Industry

APPLICATION FOR CERTIFICATE OF REGISTRATION

ADAM H. PUTNAM
COMMISSIONER

Section 581.131, F.S./Rule 5B-2.002, F.A.C.

1911 S. W. 34th St. / P. O. Box 147100, Gainesville, FL 32614-7100 / (352) 372-3505

PLEASE PRINT ALL INFORMATION

Return This Form with Check or Money Order Payable to:

FDACS - DIVISION OF PLANT INDUSTRY
P.O. BOX 147100
GAINESVILLE, FLORIDA 32614-7100

Firm Name: _____ Date: _____
Owner: _____ Fee Due: \$ _____
Address (Mailing): _____
Physical Location: _____ Telephone: () _____
Email Address: _____ Fax: () _____

CHECK ONE:

[] The above nursery has been inspected by an authorized representative of the Division of Plant Industry. With this signed application and remittance of the specified fee above or upon establishment of exemption as described below, the above nursery is eligible for a CERTIFICATE OF NURSERY REGISTRATION.

_____ Nursery stock produced for sale or distribution, including own-use nurseries.

_____ Government agency producing nursery stock not for sale or gift.

[] The above listed firm hereby makes application for a NURSERY STOCK DEALER'S CERTIFICATE OF REGISTRATION by completing and signing this agreement and by remitting a fee of \$25.00 per location or \$69.00 per location if the inventory is 5000 or more plants.

_____ Number of locations at \$25.00 Will your business be selling citrus plants? _____

_____ Number of locations at \$69.00 (yes or no)

(Furnish a complete address and telephone number for each location)

APPLICANT AGREES TO:

- 1. Deal only in nursery stock that has been inspected and approved by the Division of Plant Industry...
2. Not knowingly sell or distribute nursery stock to individuals intending to resell...
3. Not knowingly sell or distribute nursery stock for planting within 100 feet of a commercial citrus grove...
4. Not bring or cause to be brought into the state any citrus plants or parts of citrus plants...
5. Furnish a list of all plant movements with full name and address of all purchases...
6. When requested to do so, return all inspection certificates (tags) on hand...
7. Permit the entry of authorized representatives of the Department for the purpose of inspecting plants...

Signed: _____ Title: _____

Federal Employee Identification Number (FEIN) must be shown when available.

FEIN # _____

DPS # _____ CO # _____ RISK FACTOR _____ ROUTE NUMBER _____

Original - Gainesville, Yellow - Applicant, Pink - Inspector